TITLE INSURANCE COMPLAINT FORM and INVESTIGATIVE QUESTIONNAIRE

1.	Full Name Street Address City, ST Zip Code Daytime Telephone Cell Phone E-mail Address Pager Evening Telephone				
2.	Type of Transaction	(Check One)	Purchase	Refinance_	
3.	Name of Title Agency Escrow Officer Escrow File No.				
4.	If a Split Closing, Name of Other Title Agency Escrow Officer Escrow File No.				
5.	Real Estate Firm, Buyer Selling Agent				
6.	Real Estate Firm, Seller Listing Agent				
7.	Mortgage Broker Investor/Lender				
8.	Have you filed a claim with the Title Agency or Title Insurer? Yes No				
9.	Describe in detail, the nature of the problem or complaint. Use additional sheets if necessary				

TITLE INSURANCE COMPLAINT FORM and INVESTIGATIVE QUESTIONNAIRE

Please include copies of any supporting documentation you have in your possession, such as the following:

HUD-1 Settlement Statement
Real Estate Purchase Contract (if applicable)
Title Commitment or Title Policy
Lenders Closing Instructions
Copy of the Promissory Note and Trust Deed
Copy of the Warranty Deed, Quit Claim Deed or other conveyance
Copy of any type Power of Attorney (if applicable)